1. Incident Name:		2. Operational Period: (Date /	/ Time)	3. Demobilization No.:			
Hurricane Harvey		From: 9-10-17 To: 9-22-17		36270 DE		DEN	IOBILIZATION CHECK-OUT ICS 221 - EPA
				Contact No:			484-437-9378
4. Unit/Personnel Released		Community Liaison		Estimated Time of Departure/Arrival:			9-22-17 @ 6:00pm
5. Transportation Method American Airlines				6. Actual Release Date/Time:			
8. Destination:				7. Manifest: Yes, Number: No			
Philadelphia, Pennsylvania				9. Notified:	☐ Agency ☐ Region ☐ Area ☐ Dispatch Name: Samuel Tates/Janetta Coats Date: 9-21-17		
10. Unit Leader Responsible for Collecting Performance Rating:			Samuel Tates				
11. Unit/Personnel:							
Demobilization Unit Leader check the appropriate box:							
Logistics Section	Supply Unit						
	Communications Unit						
	Facilities Unit						
	Ground Support Unit Leader						
Finance Section	Time Unit						
Planning Section	Documentation Unit						
Other							
12. Remarks:							
5. Prepared by:					(Date / Time)		
Name/Position: Linda R. Watson, Community Liaison Signature: Linda R. Watson					tson		9-21-17 @5:17pm
DEMOBILIZATION CHECK-OUT						ICS 221 - EPA (Rev 02/10)	

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